Addiction Professional Credentialing: The Need for National Standards

The addiction professional workforce is represented by more than 100,000 counselors, educators, and other addiction-focused health care professionals. Addiction professionals specialize in prevention, intervention, treatment, recovery support, and education, and work across a wide-variety of settings including outpatient care centers, mental health and substance use disorder facilities, general medicine and surgical hospitals, and private practice clinics, as well as criminal justice agencies, juvenile detention facilities, halfway houses, detoxification centers, other social service agencies, and more.

Support for Individuals with Substance Use Disorder

Access to high quality, effective treatment and recovery services is critical to addressing our nation’s addiction epidemic. Licensure and credentialing requirements, however, vary greatly from state to state and serve as a barrier to entry, advancement, and retention for this key segment of the workforce. The COVID-19 pandemic has also accelerated the advancement of telehealth as an acceptable form of assessment and treatment, so it is more important than ever that we have standardized credentials that are able to cross state boundaries and offer the support that a mobile society of people in recovery needs to have in their lives.

Support for the Addiction Workforce

Historically, new members of the addiction profession have been forced to navigate without a distinct roadmap or career ladder to guide their development. In response to this issue, NAADAC, the Association for Addiction Professionals, joined the Substance Abuse & Mental Health Services Administration (SAMHSA) and other key stakeholders in 2011 to develop a model scope of practice and career ladder for the addiction workforce. The model outlines reasonable and realistic scopes of practice for each level and provides clear gateways into the profession’s ranks.

A standard, recognizable set of addiction professional credentials would provide clarity for providers and payers, as well as assurance to individuals seeking quality, effective treatment and recovery services for themselves or their loved ones.

While licenses are state-issued authorizations to practice in a specific field, credentials are the standard-bearers for experience and levels of education. Some states require credentials in order to attain a license while others do not grant licenses, and instead rely on various certifications to permit a provider to practice within the state. National credentials would set uniform standards for education, experience, and competency, and could be portable at both state and national levels. These standards of knowledge and competency for treating SUDs was supported by the work of SAMHSA and other key stakeholders and published by SAMHSA in the TAP 21 and 21A.

We urge Congress to work with NAADAC and other stakeholders in the addiction workforce to support national credentials that have been developed to ensure standardized training and education requirements are utilized to educate, train, and credential the next generation of addiction professionals. Enacted together, these elements would create new generations of treatment providers capable of addressing the full range of SUDs and support individuals, families and communities in the treatment and recovery continuum to address the current opioid crisis and the next addiction crisis yet to come.

NAADAC, the Association for Addiction Professionals, represents the professional interests of more than 100,000 addiction counselors, educators and other addiction-focused health care professionals in the United States, Canada and abroad. For more information, please visit www.naadac.org or contact NAADAC at naadac@naadac.org.